REQUEST FOR CONTINUED **EXAMINATION (RCE) TRANSMITTAL**

ATTORNEY DOCKET NO. 70014.0013USO1

U.S. APPLICATION SERIAL NO. 09/975,257

CONFIRMATION NO

FILING DATE

REGISTRATION NO. 44,118

October 12, 2001

INVENTOR(S)

NAME

Dawn Gardner Krosnick

Sundar Narayanan et al.

EXAMINER **Heather Anne Doty** GROUP ART UNIT 2813

AUG 2 3 2005

TITLE OF APPLICATION

NOVEL SELF MONITORING PROCESS FOR ULTRA THIN GATE OXIDA

	Mail Stop RCE	= = = = = =		
ADDRESS TO:	Commissioner for Patents P.O. BOX 1450			
ALEXANDRIA, VA 22313-1450				
This is a Request for Continued Examination under 37 CFR 1.114 of the above-identified application.				
Request for Continued Examination (RCE) practice under 37 C.F.R. 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.				
1. Submission required under 37 CFR 1.114				
a. Previously submitted. If a final office action is outstanding, any amendments filed after the final office action may be considered as a submission even if this box is not checked.				
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on				
ii. Other				
b. Enclosed				
i. ⊠ Amendment/Request for Reconsideration ii. □ Affidavit(s)/Declaration(s)				
iii.				
iv. Dther				
2. Miscellaneous				
Suspension of action on the above-identified application is requested under 37 CFR. 1.35 U.S.C. §103(a)(c) for a				
a. L period	period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required).			
b. Other				
3. Other Enclosures				
a. 🗵 Fee Transmittal Sheet (in duplicate)				
b. Request for Extension of Time for 1 month (in duplicate)				
c. Other				
4. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.				
a. 🖾 to Depos	to Deposit Account No. 13-2725. A fee transmittal sheet in duplicate is enclosed.			
	i. 🖾 RCE fee required under 37 CFR 1.17(e)			
	ii. Extension of time fee (37 CFR 1.136 and 1.17) 08/24/2005 JADDO1 00000008 132725 09975257			
iii. ☐ Other 01 FC:1801 790.00 DA				
b. \square A check in the amount of enclosed.				
c. Payment by credit card (Form PTO-2038 enclosed)				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information on PTO-2038.				
CORRESPONDENCE ADDRESS				
☐ The address associated with Customer Number: 23552 OR ☐ correspondence address below				
Name Address				
City	State		Zip Code	
NAME S	teven B. Kelber	REGISTRATION NO.	30,073	
SIGNATURE	any alder bounce	DATE August 23, 2005	TELEPHONE 202.326.0300	